This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

	(CA	LCULA	110N 2	HEE1)		
APPLICATION	NUMBER:	9/9	515152	-		
		•				
		Total Fee	Calculatio	۵		
	Fee Cade	Total # Claims	Number Extra X	Fee	Fee =	Total
_	Sm./Lg.			Sm. Entity	Lg. Entity	
Busic Filing Fee	201/101				<u>690</u> -	
Total Claims >20	203/101	25 .20 -	<u>x</u>		90 -	
Independent Claims >3	202/102	3	x			
Mult. Dep Claim Present	204/104					
Surcharge	205/105	•			130.	
English Translation	139					
TOTAL FEE CALCULA	ATION					910
Fees due upon filing t	he application:					
Total Filing Fees Due	= \$	910				
Less Filing Fees Suba	nitted - S	Ø			·	
BALANCE DUE	= 5	910				
Office of Lairie Barre	M					

Figure 7

FORM OIPE-RAM-01 (Rev. 12/97)